



CITY OF KIRKLAND
PLUMBING PERMIT APPLICATION
(USE MECHANICAL PERMIT APPLICATION FOR GAS PIPING)

Permit # _____

Site Address: _____

- PLEASE PRINT -

Project Name: _____

#1

Property Owner _____ Phone _____
Property Owner's Address _____ City, Zip Code _____
Describe Job to be Done _____

#2

Contractor's Name _____ Contractor's Reg. # _____
(Company Name) Expiration Date _____
Contractor's Address _____ State UBI # _____
City, Zip Code _____ Phone _____

I have read Chapter RCW 18.27.010 relating to definitions of general contractors and specialty contractors and Chapter RCW 18.27.110, which prohibits issuing permits without proof of registration. **OWNER/CONTRACTOR SIGNATURE:** _____

#3

Contact Person _____ Daytime Phone _____
Address _____ Alt. Phone _____
City _____ State _____ ZIP _____ Fax # _____
Email _____

#4

Property Tax Account Number (Parcel Number) _____

#5

Estimated cost, plumbing portion only _____

#6 Number of Plumbing Fixtures (including rough-ins):

****NOTE: For Gas Piping, use Mechanical Permit Application****

Move	New	Existing		Move	New	Existing	
_____	_____	_____	Interior Plumbing Lines	_____	_____	_____	Backflow Preventer
_____	_____	_____	Tub or Tub/Shower Combo	_____	_____	_____	Floor Drain
_____	_____	_____	Shower (Stand Alone)	_____	_____	_____	Floor Sink
_____	_____	_____	Kitchen Sink	_____	_____	_____	Mop Sink
_____	_____	_____	Laundry Sink	_____	_____	_____	Medical Gas
_____	_____	_____	Bar Sink	_____	_____	_____	Trap Primer
_____	_____	_____	Lavatory (Bathroom Sink)	_____	_____	_____	Grease Trap
_____	_____	_____	Clothes Washer	_____	_____	_____	Waste Interceptor
_____	_____	_____	Dishwasher	_____	_____	_____	Other Fixtures
_____	_____	_____	Water Closet (Toilet)	_____	_____	_____	Water Service Line (ft) _____
_____	_____	_____	Urinal	_____	_____	_____	Water Service Size
_____	_____	_____	Bidet	_____	_____	_____	Water Meter Service
_____	_____	_____	Hose Bib	_____	_____	_____	Other
_____	_____	_____	Water Heater	_____	_____	_____	

#7 If you are re piping, are you replacing metal piping with plastic piping, and is the electrical system bonded to the piping?
YES _____ **NO** _____ **If YES, you must also get a separate electrical permit to re-ground the electrical system.**

By signing this application, I authorize employees/agents of the City of Kirkland to enter onto the property which is the subject of this application during regular business hours. The sole purpose of entry is to make any examination of the property which is necessary to process this application.

I certify under penalty of perjury that the information furnished by me is true and correct to the best of my knowledge and, further, that I am authorized by the owner of the above premises to perform the work for which permit application is made. I further agree to save harmless the City of Kirkland as to any claim (including costs, expenses, and attorney's fees incurred in investigation and defense of such claim), which may be made by any person, including the undersigned, and filed against the City of Kirkland, but only where such claim arises out of the reliance of the City, including its officers and employees, upon the accuracy of the information supplied to the City as a part of this application.

OWNER/AGENT: _____ DATE: _____

City of Kirkland 123 5th Avenue Kirkland, WA. 98033 425-587-3600

City Website: www.ci.kirkland.wa.us

Permit Information: www.kirklandpermits.net

NOTE: Permit Applications not requiring plan review are accepted Monday-Tuesday-Thursday-Friday 8-4:30, Wednesday 10:30-4:30

Permit Applications requiring plan review are accepted Monday-Tuesday-Thursday-Friday 8-4:00, Wednesday 10:30-4:00